

# Countermeasure and Response Administration



## Overview and System Demonstration

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# Purpose of Today's Webinar



- ❑ **Presentation and demonstration of the CRA system**
  - **Provide a general overview of the system**
  - **To show the system's multiple capabilities**
  - **Discuss how CRA can support and link with an inventory management system**

# Agenda



- ❑ **Background**
- ❑ **System Features**
- ❑ **System Demonstration**
- ❑ **Questions and Answers**

# Definitions



- ❑ **Countermeasure** – intervention taken to help prevent and/or slow the spread of disease; countermeasures may include medical interventions such as vaccinations, pharmaceuticals and non-medical interventions such as patient isolation and quarantine
- ❑ **Event** – public health programs or emergency responses that require the administration of countermeasures

# **Countermeasure and Response Administration (CRA)**



- ❑ **Genesis in Pre-Event Vaccination System (PVS) for national smallpox vaccination campaign**
- ❑ **Supports mass tracking during an event**
  - **Tracks both detail (person level) and aggregate counts of countermeasures**
- ❑ **Evolved to support any countermeasure, any event**
  - **Medical interventions (vaccines, pharmaceuticals)**
  - **Non-medical interventions (patient isolation, quarantine, scarce medical equipment and social distancing measures)**

# CRA's Use During H1N1



- ❑ **Two ways CRA was used during the H1N1 event**
  - **To monitor and collect data on vaccine doses administered**
  - **To collect data on inventory levels and medical countermeasure use**

# H1N1 Doses Administered Event 2009-2010



- ❑ **The National Strategy for Pandemic Influenza: Implementation Plan calls for monitoring of the appropriate use of a scarce pandemic influenza vaccine**
- ❑ **CRA was used to track and monitor H1N1 Doses Administered for the initial weeks of the H1N1 Vaccine Program**
- ❑ **To accomplish this, Project Areas\* tracked vaccine doses administered, collected and aggregated minimum data elements and transmitted weekly to CDC**

\* **Project Areas:** The 62 Public Health Emergency Preparedness (PHEP) grantees, which include 50 states, 8 territories, and 4 metropolitan areas

# Aggregate Reporting Options via CRA



CDC's CRA system provides multiple ways for states and partners to report information to CDC



State enters data into state's Immunization Information System or other equivalent application and is extracted in one of these formats:

Pipe-delimited File

XML File

HL 7

File is securely transferred to CDC via either CRA application or PHIN MS and loaded into CRA for reporting



**Option 1  
Data Exchange**



Aggregate data entered directly into CRA via the web-based aggregate reporting interface

Data is available in CRA for reporting



**Option 2  
Direct Web Entry**



Individual level data is entered directly into CRA via the web based flexible Treatment interface

Individual level data are automatically aggregated by CRA and are available for reporting



**Option 3  
Individual Level  
Data Entry**



# Medical Countermeasure Situation Report



- ❑ **Single standardized data collection tool developed to minimize the reporting burden to multiple federal departments/agencies**
  - **Based on questions which were of keen interest to national leaders since the outbreak of H1N1 in the spring of 2009**
  - **Ability to integrate with existing inventory management systems at the state and local level**
- ❑ **Purpose**
  - **Notify national leaders of inventory levels and current medical countermeasure usage**
  - **Monitor on-going nationwide supply and demand**
  - **Inform future actions on deploying Strategic National Stockpile (SNS) assets**

# Medical Countermeasure Situation Report



- ❑ **Information gathered from the tool provides visibility**
  - **Current antiviral and Personal Protective Equipment (PPE) inventory levels at State and Regional RSS (Receive, Stage and Storage) and Local areas**
  - **Distribution of antivirals and PPE regimens shipped per local area**
  - **Shortages of antiviral regimens and PPE > 24 hours**
  - **Antiviral regimens dispensed to high- risk groups**
- ❑ **Data from multiple sources formed complete picture**
  - **State, regional, and local data was collected and entered into CRA**
  - **Commercial drug suppliers reported data to Countermeasure Supply Chain Dashboard**
  - **Data from both systems was consolidated and summarized within the Dashboard forming a nationwide inventory picture**

# Major System Features



- ❑ **Rapid Data Entry**
- ❑ **Aggregate Reporting**
- ❑ **Import**
- ❑ **Adverse Events**
- ❑ **User Defined Fields**
- ❑ **Offline Deployment**
- ❑ **Synchronization**
- ❑ **Data Extracts**

# New Hampshire Anthrax Event 2009-2010



Centers for Disease Control and Prevention  
Your Online Source for Credible Health Information

## Morbidity and Mortality Weekly Report (MMWR)

### Gastrointestinal Anthrax after an Animal-Hide Drumming Event --- New Hampshire and Massachusetts, 2009

*Weekly*

July 23, 2010 / 59(28);872-877

- ❑ **December 4, 2009 - Confirmed case of gastrointestinal anthrax after a drumming event in Durham, NH**
  - NH Dept. of Health & Human Services made antibiotics and anthrax vaccine available to anyone who attended the drumming event
  - Prepared to use CRA for countermeasure tracking
  - Previously prepared for this type of event with an exercise in 2007

# Scenario



- ❑ **New Hampshire Anthrax Exercise – April 2007**
  - **Offline CRA used at a POD**
  - **Stadium outbreak with affected population in Rochester, NH**
  - **Scope of attack unknown; treatment advised**
  - **Treatment center established**
  - **Emergency supply of antibiotics ordered from Strategic National Stockpile**
  - **Crowds seeking immediate treatment begin gathering**

# CRA Demonstration



- ❑ **Rapid Data Entry**
- ❑ **Record Adverse Event**
- ❑ **Form Customization**
- ❑ **Import**
- ❑ **Generate Report**

# Ongoing Outreach/Input



*The CTS team continuously seeks input from multiple levels of public health; recommendations are used as the basis for ongoing development efforts*

Public Health Project Area and Partner Input	Exercises: Alabama, California, Maryland, New Hampshire, New York, Wyoming
	Conferences: APHA, CSTE, NACCHO, NIC, PH Preparedness Summit and PHIN
	CRA Development Working/Focus Groups
	Webinars: General and Aggregate Reporting Training
	CSTE Survey
CDC Programmatic and Scientific Input	Exercises: Pandemic Influenza, Anthrax, Radiological
	CCID – NCIRD/ISD/ID; NCPDCID/DBPR, NCZVED/DFBMD
	OPHPR– DEO, DSLR, DSNS
	OD/ISO/ICU
	OSELS/PHITPO– DIPPC, DISO, OD

# Getting Started With CRA



- ❑ Consider using CRA during an exercise
- ❑ Demonstration version is available for partner “try outs”
  - Website: <http://crademo.cdc.gov>
  - For login/password information, contact the PHIN Help Desk
- ❑ PHIN Help Desk first line of contact for accessing CRA
  - Telephone 1-800-532-9929: 8 AM to 8 PM EST
  - Email: [PhinTech@cdc.gov](mailto:PhinTech@cdc.gov)



# CRA Team Contact Information



- ❑ Barbara Nichols, OSELS/PHITPO/DISO CTS Project Lead, [bnichols@cdc.gov](mailto:bnichols@cdc.gov)
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# Questions?

**[crahelp@cdc.gov](mailto:crahelp@cdc.gov)**

**<http://www.cdc.gov/phn/cra>**

**For more information please contact Centers for Disease Control and Prevention**

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

E-mail: [cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov) Web: [www.cdc.gov](http://www.cdc.gov)

*The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.*

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Public Health Informatics and Technology Program Office

